CONSTRUCTION PERMIT

Date Issued 6-7-05

Permit # 05-171

IDENTIFICATION Block 49 Lot 4 Qualification Code

Work Site Location 313 Brinley Ave
Bradley Beach N.J.

Owner in Fee Diane & Peter Baksinski

Address 313 Brinley Ave
Bradley Beach N.J.

Tel. ( )

Contractor Total McLeight Inc

Address 312 Brinley Ave
Bradley Beach N.J 07720

Tel.

Lic. No. or Bldrs. Reg. No. 13VH 000 67700

Is hereby granted permission to perform the following work:

[X] BUILDING [ ] PLUMBING [ ] LEAD HAZARD ABATEMENT
[ ] ELECTRICAL [ ] FIRE PROTECTION [ ] DEMOLITION
[ ] ELEVATOR DEVICES [ ] ASBESTOS ABATEMENT (Subchapter 8 only) [ ] OTHER

DESCRIPTION OF WORK: Remove Existing 2 layers of Roofing and Wood Shake. Install 1/2 CDX Plywood + Dimensional Shingle

NOTE: If construction does not commence within one (1) year of date of issuance, or if construction ceases for a period of six (6) months, this permit is void.

Estimated Cost of Work $ 4000

Construction Official

6-03-05
Date

PAYMENTS (Office Use Only)

Building	96
Electrical	
Plumbing	
Fire Protection	
Elevator Devices	
Other	
DCA State Permit Fee	5
Cert. of Occupancy	
Other	
Total	101
Check No.	3800
Cash	
Collected by	

(see reverse side)

U.C.C. F170 (rev. 01/04)

1 WHITE–INSPECTOR 2 CANARY–OFFICE 3 PINK–TAX ASSESSOR 4 GOLD–APPLICANT

BUILDING SUBCODE TECHNICAL SECTION

Date Received 6-2-05
Date Issued 6-9-05
Control #
Permit # 05-171

A. IDENTIFICATION—APPLICANT: COMPLETE ALL APPLICABLE INFORMATION. WHEN CHANGING CONTRACTORS, NOTIFY THIS OFFICE. CALL UTILITY DIG NO: 1-800-272-1000.

Block 69 Lot 7
Work Site Location 313 Brinley Ave
Bradley Beach N.J 07720
Owner in Fee Dixie & Peter Bakalian
Address 313 Brinley Ave
Bradley Beach N.J
Tele. (732)
Contractor John McLaughlin
Address 312 Brinley Ave
Bradley Beach N.J
Tele.
Lic. No. or Bidrs. Reg. No 13VH 00667760
Federal Emp. No.

C. CERTIFICATION IN LIEU OF OATH

I hereby certify that I am the (agent of) owner of record and am authorized to make this application.

Signature

D. TECHNICAL SITE DATA

DESCRIPTION OF WORK

Remove existing 2 layers of Roofing and wood Shake. install ½ CDX Plywood, ice & weather Shield first 3ft of all Valley. #15 lb felt Paper & Dimensional Shingles.

JOB SUMMARY (Office Use Only)

PLAN REVIEW	Date	Initial
[ ] No Plans Required		
[ ] All		
[ ] Footing		
[ ] Foundation		
[ ] Frame		
[ ] Other		
Joint Plan Review Required:		
[ ] Elec. [ ] Plumb. [ ] Fire [ ] Elevator		
SUBCODE APPROVAL		
[ ] CO [ ] CCO [X] CA		
Date: 6-29-05		
Approved by:		

INSPECTIONS Type:	Failure	Failure	Approval	Initial
	Dates (Month/Day)			
Footing				
Foundation				
Slab				
Frame				
Barrier-Free				
Insulation				
Finishes				
Energy				
Mechanical				
TCO				
Other				
Final				
Barrier-Free				

TYPE OF WORK:

- [ ] New Building
- [ ] Addition
- [ ] Alteration
  - [X] Roofing
  - [ ] Siding
  - [ ] Fence _____ Height (exceeds 6')
  - [ ] Sign _____ Sq. Ft.
  - [ ] Pool
  - [ ] Asbestos Abatement Subchapter 8
  - [ ] Lead Haz. Abatement NJAC 5:17
  - [ ] Other _____
- [ ] Demolition

FEE (Office Use Only)

$ 96-

Administrative Surcharge	$	
Minimum Fee	$	
DCA Training Fee	$	5-
TOTAL FEE	$	101-

B. BUILDING CHARACTERISTICS

Use Group	Present	Proposed
Constr. Class	Present	Proposed
No. of Stories		
Height of Structure		Ft.
Area — Largest Floor		Sq. Ft.
New Bldg. Area/All Floors		Sq. Ft.
Volume of New Structure		Cu. Ft.
Total Land Area Disturbed		Sq. Ft.

Est. Cost of Bldg. Work:

1. New Bldg. $ _____
2. Alteration $ 4,000
3. Total (1+ 2) $ 4,000

U.C.C. F110
(rev. 3/96)

1- White = Inspector Copy
2 Canary = Office Copy
3 Pink = Office Copy
4 Gold = Applicant Copy